

COUNTY BOROUGH OF MIDDLESBROUGH



LOCAL EDUCATION AUTHORITY

ANNUAL REPORT

FOR 1958

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

ERIC C. DOWNER

M.A., D.P.H.



*With the Compliments
of the
Medical Officer of Health
and
Principal School Medical Officer*

*Health Department
26 Southfield Road
Middlesbrough*

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SCHOOL HEALTH DEPARTMENT,
WOODLANDS ROAD,
MIDDLESBROUGH.

TO THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE COUNTY BOROUGH OF MIDDLESBROUGH,
BEING THE LOCAL EDUCATION AUTHORITY :

Mr Mayor, Ladies and Gentlemen,

I have the honour to present my Annual Report on the work of the School Health Service, for the year 1958.

An outstanding feature this year has been the attempt to offer inoculation against poliomyelitis to all children between the ages of six months and 15 years, including a very high fraction of Middlesbrough schoolchildren. This essential work—to which there has been a fair public response—has caused the diversion of your School Medical Officers to some extent from routine school inspections to vaccination sessions and the Deputy School M.O. and the Senior Medical Officers of the Health Department have also been engaged considerably on this work.

At the end of the year the campaign was in full swing, but it was found that public keenness had got to be stimulated from time to time. Parents are asked now to submit their children to so many different vaccinations and inoculations, and so much has been said in Ministerial pronouncements and in the public Press about the advantages and the safety and efficacy of different types of poliomyelitis antigen that the public have sometimes not been very sure what was really the right thing to do for the children. It has been necessary—and in this matter we have had great co-operation from the local Press—to try and set the matter in plain English to parents desirous of illumination and guidance.

Otherwise, study of this Annual Report will reveal that a very fair amount of work has been done by the Department.

Mr Howard L. Crockatt, our Consultant Orthopaedic Surgeon who is also Surgeon Superintendent of Kirbymoorside Hospital,

tendered his resignation at the end of July on the grounds of ill-health. This severed a link more than 30 years old between the Middlesbrough School Health Service and this eminent and skilful surgeon.

It is as long ago as 1927 that the then Medical Officer of the Board of Education addressed a joint meeting of the Education Committee and the M. & C.W. Committee on the desirability for a scheme for the treatment of minor orthopaedic cases. Such a scheme was approved by the Board of Education and Mr Crockatt first saw children at our School Clinic in 1928.

For 30 years, therefore, the Education Committee and the children of Middlesbrough have had the services of Mr Crockatt and access to beds in his beautifully situated hospital at Kirbymoorside. The Education Authority's medical staff have had the benefit of the advice and the friendship of this skilled surgeon.

We take leave of him with very grateful hearts and with deep regret that he has had to retire and we express the hope that in the restful and beautiful island where he has gone to live, he will be restored to health and have many years of happy retirement.

Arrangements are being pursued with the Newcastle Regional Hospital Board and the local Consultant Orthopaedic Surgeons for the maintenance of the School Orthopaedic Clinic. It seems that for the time being, at least, our children will continue to go to Kirbymoorside.

Your medical staff sustained a great loss by the sudden death on 2nd February, 1958, of Dr Arthur J. Conlin. During Dr Conlin's tenure of office as School Medical Officer we had found him an excellent clinician and a witty, observant man, most companionable in disposition and most informative, because he had travelled much and thought much as a result of his experiences.

We much regret his passing and extend our warm and friendly sympathy to his widow, who is employed in the Middlesbrough Health Department.

Dr A. R. Gratton was appointed, later in the year, to fill the vacancy caused by Dr Conlin's death.

I wish to call the attention of the Education Authority to the great amount of work got through by Dr J. Cahill, Senior Schools Medical Officer, and all the other School Medical Officers, and to the Nursing and Clerical Staffs who have faithfully performed their duties.

We have all been greatly helped by the Director of Education and his officers and by Mr Harold Price and the officers working under him.

We have also had much help from practitioners, family doctors, and from Consultants of the various hospitals to whom we have referred children.

Lastly, and very gratefully, I would like to thank the Chairman and Members of the Education Committee for their support and kindness to me during the year.

I have the honour to be, Mr Mayor, Ladies and Gentlemen,

Your obedient Servant,

ERIC. C. DOWNER,

Principal School Medical Officer.

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EDUCATION COMMITTEE.

The Mayor (Alderman E. A. DICKINSON, J.P.).
Alderman B. RAMSEY, (*Chairman*).
Alderman W. RANDALL, (*Vice-Chairman*).
Alderman Mrs L. BURTON.
Alderman G. S. RICHARDSON.
Alderman L. TAYLOR.
Councillor J. N. BENNINGTON.
Councillor Mrs K. V. BENNINGTON.
Councillor J. A. BROWN, C.B.E., J.P., F.R.S.H.
Councillor N. COVERDALE.
Councillor Mrs G. R. COX.
Councillor A. T. CROSBY.
Councillor C. L. ELDER, M.B., Ch.B., D.P.H.
Councillor W. FERRIER.
Councillor N. S. GOLDIE, (*Chairman, Buildings Sub-Committee*).

Councillor Mrs M. B. GOODMAN.
Councillor Mrs R. M. HASTON.
Councillor R. H. HUGGINS.
Councillor Mrs M. McMILLAN.
Councillor THE RT REV. MGR CANON M. O'SULLIVAN
Councillor H. PINDER.
Councillor L. POOLE.
Councillor Mrs A. THOMPSON.
Councillor G. R. THOMPSON.
Councillor Mrs A. WAIN, (*Chairman, Child Welfare Sub-Committee*).

Councillor H. WHITFIELD.
Councillor T. WILKINSON.

Co-opted Members : REV. CANON H. A. WAREHAM.
REV. CANON T. A. NOLAN.
REV. H. BRYANT.
Mr W. B. REID.
Mrs K. OGLE
Mr J. H. FOX.
Mr P. NIMAN.

Director of Education :
STANLEY HIRST, B.SC.

SCHOOL CLINIC AND TREATMENT CENTRES.

1. Central	M.A.C., Orthopaedic, Cleansing, Dental.	M.O., Dental Surgeon and Nurses Daily.
2. Whinney Banks School.	M.A.C., Dental	Nurse daily 9 a.m. to 12 noon. M.O. Thursday 9 a.m. Dentist (part-time).
3. Lord Street.	M.A.C.	Nurses daily 9 a.m. to 12 noon (except Wednesday). M.O. Monday 9 a.m.
4. Newport School	M.A.C.	Nurse Monday and Thursday 9 a.m. to 12 noon.
5. 159, Southfield Road	Child Guidance Clinic	By appointment.
6. 154, Borough Road	Speech Therapy	By appointment.
7. 17, Newlands Road	U.V.L. Clinic	Four sessions weekly.
8. Ayresome	M.A.C.	Nurse Tuesday and Thursday 9 a.m. to 12 noon.
9. Caldicotes School	M.A.C.	Nurse Tuesday and Friday afternoons. M.O. Friday 2 p.m.
10. North Ormesby	M.A.C.	Nurse daily 9 a.m. to 12 noon. M.O. Wednesday 9 a.m.
11. Marsh Road School	Speech Therapy	Wednesday, by appointment.

SECTION 1.—STAFF, ETC.

Interchange of medical staff exists with the Health Department both as routine and in emergency.

MEDICAL OFFICERS :

Name	Appointment	<i>Time given to S.H.S. in terms of full-time Officer.</i>
Eric C. Downer, M.A., D.P.H.	M.O.H. and Principal School M.O.	0.09
Robert Taylor, M.B., Ch.B., D.P.H.	Deputy M.O.H. & Deputy Principal School M.O.	0.09
John Cahill, B.Sc., M.R.C.S., L.R.C.P.	Senior School M.O.	0.90
Katherine Macfarlane, M.B., Ch.B.	School Medical Officer and A.M.O.H.	0.90
Thomas W. Hill, M.D., D.P.H.	School Medical Officer and A.M.O.H.	0.72
Janet B. Patterson, M.B., Ch.B.	School Medical Officer and A.M.O.H.	0.90
Arthur J. Conlin, B.A., M.B., Ch.B., B.A.O. (Died 4.2.58)	School Medical Officer and A.M.O.H.	0.90
Anne R. Gratton, M.B., Ch.B. (since 2.6.58)	School Medical Officer and A.M.O.H.	0.90

PART-TIME DENTAL ANAESTHETISTS :

H. K. Geiser, M.D., M.R.C.O.G.	General Practitioner	0.18
Harry L. Simon, M.B., B.S.	General Practitioner	0.09

AURAL SURGEON (by arrangement with Regional Hospital Board) :

R. M. Marshall, M.B., F.R.C.S.

OPHTHALMIC SURGEONS (by arrangement with Regional Hospital Board) :

Alexander E. P. Parker, M.B., B.S., F.R.C.S. (resigned 31.7.58).

Francis S. Hubbersty, M.B., B.Chir., F.R.C.S.

John S. Gourlay, M.B., Ch.B., D.O.M.S.

ORTHOPAEDIC SURGEONS (by arrangement with Regional Hospital Board) :

Howard L. Crockatt, M.B., Ch.B. (resigned 30.9.58).

Gilbert Parker, M.B., F.R.C.S.

Kathleen M. Adamson, M.Sc., M.B., Ch.B.

PSYCHIATRIST TO CHILD GUIDANCE CLINIC :
(Vacant).

PRINCIPAL SCHOOL DENTAL OFFICER :

John Auton, L.D.S.

SCHOOL DENTAL OFFICERS :

Thomas W. Clarkson, B.D.S. (Part-time).

Margaret P. Casartelli, B.D.S. (Part-time—resigned 31.3.58).

Marion F. Wootton, B.D.S. (Part-time since 3.12.58)

SPEECH THERAPISTS :

Ida M. S. Knight, F.C.S.T.

Joan McDonald, L.C.S.T. (Part-time since 3.9.58).

EDUCATIONAL PSYCHOLOGIST :

Richard Freyman, B.A.

SOCIAL WORKER (Child Guidance Clinic) :

Winifred Morton.

CHIROPODISTS (Part-time) :

L. Clayton, M.Ch.S.

L. Vanes, M.Ch.S.

W. Leybourne, M.S.S.Ch.

T. Jones, M.Ch.S., L.C.H.

SUPERINTENDENT NURSE :

Kathleen M. Crapper, S.R.N., S.C.M., H.V.

SCHOOL NURSES :

Betty Allinson, S.R.N., S.C.M.
Katherine Cameron, S.R.N., S.R.F.N.
Ethel Howard, S.R.N.
Irene Mole, S.R.N.
Dorothy S. Owen, S.R.N., H.V.
Dorothy Parkin, S.R.N., S.R.C.N.
Myfanwy Short, S.R.N., S.C.M., B.T.A.
Elsie Smith, S.R.N., S.R.F.N. (resigned 31.1.58).
Joan Tweddle, S.R.N.
Brenda Walsh, S.R.N., S.R.F.N.
Wilhelmina Sillett, S.R.N., S.R.F.N., S.C.M.
Edna Wilson, S.R.N., S.C.M.

AUXILIARY NURSES :

Dorothy Hall (resigned 31.11.58).
Muriel Rossi, S.E.A.N. (since 1.12.58).

DENTAL ATTENDANTS :

D. Nolan, S.E.A.N.
L. M. Ward.

CLERICAL STAFF

Margaret Dickinson (Senior Clerk).
Betty Atter (since 10.11.58).
Anne Botham (resigned 31.10.58).
Mary L. Doonan.
Vera Newman.
Mary T. Walton.
Marion Wilson.

NUMBER OF PUPILS : ATTENDANCE :
COST OF SERVICE, 1958.

(Supplied by the Director of Education).

PRIMARY AND SECONDARY MODERN SCHOOLS :

Number of Schools	...	...	...	...	40
Number of Departments	...	...	...	...	82
Number on Roll	...	...	...	...	27,216
Average Attendance	...	...	...	...	24,938
Average percentage	...	...	...	...	91.63

SECONDARY GRAMMAR SCHOOLS :

Number of Schools	...	...	...	...	6
Number on Roll	...	...	...	...	2,791
Average attendance	...	...	...	...	2,650
Average percentage	...	...	...	...	94.95

SECONDARY TECHNICAL SCHOOL :

Number on Roll	...	...	...	...	313
Average attendance	...	...	...	...	294
Average percentage	...	...	...	...	93.93

SPECIAL SCHOOLS :

Number of Schools	...	...	...	...	2
Number on Roll	...	...	...	...	221
Average attendance	...	...	...	...	198
Average percentage	...	...	...	...	89.60

AVERAGE PERCENTAGE ATTENDANCE FOR ALL SCHOOLS 91.94

TOTAL NUMBER ON ROLLS (AVERAGE) ... 30,541

COST OF SCHOOL HEALTH SERVICE, 1958
(Supplied by Borough Treasurer).

Total Cost	...	...	...	...	...	£33,116
Government Grant	...	...	...	...	...	£19,870
Cost in terms of penny rate	...	...	...	...	...	2.242d.

SECTION II—SCHOOL HYGIENE.

I am indebted to the Director of Education for the following details :—

“(a) SANITARY ACCOMMODATION.

Defective sanitary fittings have been replaced at the following schools :—Marton Grove Boys', Ayresome (all departments), Whinney Banks Girls' and Boys', and the Technical School for Boys.

Undercover sanitary accommodation for boys has been provided at the Burlam Road Special (E.S.N.) School and cover provided for the Infants' Department at Linthorpe Primary School.

(b) HEATING, HOT AND COLD WATER INSTALLATIONS.

New Boilers have been installed at Archibald and Hugh Bell Boys' Schools and considerable improvements to heating carried out at numerous other schools.

New wash basins with hot and cold water services have been installed at Burlam Road Special (E.S.N.) School and further hot water services provided at Marton Road Junior and Secondary Schools, St. Patrick's Girls' and Junior Schools.

Cold water services have been improved at St. Alphonsus' Junior and St. Patrick's Infants Schools.

(c) ELECTRICAL INSTALLATIONS.

Rewiring has been carried out at Linthorpe Junior and St. Patrick's Senior Schools together with new modern fittings to bring these schools up to present day standards.

(d) GENERAL INFORMATION.

Further improvements have been made to the ventilation and light at Marton Road Secondary and Marton Road Infants' Schools by the provision of new windows and considerable work has been effected in the form of new and reconditioned floors at many of the older schools”.

SECTION III—MEDICAL INSPECTIONS.

Routine Medical Inspection was carried out as detailed below :

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Age Groups Inspected (by year of birth)	No. of Pupils Inspected
1954 and later	200	1947	401
1953	1989	1946	1682
1952	687	1945	619
1951	70	1944	49
1950	1902	1943 and earlier	2431
1949	867		
1948	31	Total	<u>10928</u>

Our work during 1958 was hampered by the necessity of giving additional help to Health Department which remained short of medical staff and by participation in Poliomyelitis Vaccination sessions. As a result, our efforts in certain fields of activity (as mentioned later) had to be curtailed.

However, we did not cut down Routine Medical Inspections and the above figures show that an impressive number of pupils (almost one third of total number on rolls) received routine medical inspection which number represents an immense amount of hard and persistent work.

Pupils were examined at 5 yrs + or Entrant Group; 8 yrs + or Junior School; 12 yrs + or Secondary School Group; and at 14 yrs + or Leaver Group. Pupils in Nursery Classes were examined each term as far as practicable. Grammar and Technical School Pupils were examined at 11 yrs + Entrant Group; Leaver Group (15 yrs + and upwards). As Grammar School Leavers comprise several age groups it was thought that we showed excessive zeal in doing so many age groups and, in future, the Grammar School Leaver Inspection will be restricted to 15 yr + pupils, apart from those whose parents or teachers wish them to be specially examined.

The scatter in age groups detailed in statistical return is due, in part, to the fact that we examined pupils according to educational years, i.e. in classes. This is more convenient for teachers and pupils are less likely to be missed. A second cause for scatter is that all pupils entering Middlesbrough receive a medical inspection on admission.

FUTURE OF ROUTINE MEDICAL INSPECTION.

Quite recently, great interest has been shown in what one may term the machinery of routine medical inspection. Much has been heard of the necessity of altering methods to meet the needs of an age of change. In fact, every age is an age of change but one thing does not change which is that there is no royal road to knowledge—not even to knowledge of children's state of health.

It has been suggested that if all pupils receive routine medical inspection as Entrants and as Leavers the supervision of their health during the intervening years can be accomplished by nurses' surveys with medical examination of selected pupils. By this means it is hoped to reduce the numbers receiving routine medical inspection, an activity which some find monotonous. The total number of pupils examined will thus be reduced but it is hoped that selected children will be examined more thoroughly.

In general, any scheme for increased time for examination of each pupil is to be applauded and we have reduced the numbers called for routine medical inspections to 18 per session in Entrants and 20 per session in older pupils. Nevertheless, medical examination of specially selected pupils will raise difficulties. It may not be easy to furnish reasons to individual mothers as to why their children were rejected for medical inspection.

Surveys are of two types (i) the survey in which use is made of a diagnostic adjuvant e.g. Audiometer. This type of survey is valuable but, it is not rapid. We constantly make use of it. (ii) The old fashioned rapid survey which has been out of fashion in this service for years. This type has a use in times of acute shortage of staff but in more normal times it constitutes a retrograde step. Quite recently, one has heard of a Scabies Survey consisting of inspection of hands and wrists of pupils. In this town, such procedure would involve missing about one quarter of all cases of Scabies. Other surveys e.g. Psychological Surveys have been conducted at such a relatively breakneck pace that it is almost ungallant to say anything about them.

Our dependence on medical inspection of every child is not founded on reluctance to experiment. The issue was discussed in our 1947 report when (influenced by the Astoria Survey Report) it was hoped to organise medical inspections based on teacher-nurse conferences. This plan was speedily abandoned.

As regards monotony of medical inspection it is an advantage if a man is interested in his work. Some have a gift for becoming interested in the work of the moment; others devise techniques for developing interest but it is a mistake to equate interest and knowledge as is often done. Finally, it must be remarked that the world would cease to turn if men tackled each day only those tasks which interested them.

Our Nurses have usually been attached for long periods to individual schools and during 1958, we reverted to an arrangement by which Doctors too are attached to schools. Our Medical Officers, with one exception, show varying degrees of enthusiasm for this arrangement. The medical Officer who is an exception is sceptical as to the value of continuity of Medical Officer and maintains that the interests of the child are best served when he is examined by different Medical Officers during his school career. Most Head Teachers appear to like our altered system; a minority dislike it. Our Nurses prefer a measure of continuity in school duties but they dislike the idea of permanent attachment to schools throughout their careers. The ideal sometimes upheld of attachment of a school nurse to a district in which she will be "responsible for all the children in the family", is unrealistic in the circumstances of this town. Children of the same family, especially when the secondary stage of education is reached, may attend different types of schools, some placed at a considerable distance from their homes. On the administrative side our new system makes work more complicated. Altogether, the "Medical Officer for Schools" plan in which so many personal factors are involved can not be evaluated in black and white terms.

CENTRAL CLINIC (Accommodation).

Now that our Medical Staff is up to establishment, accommodation difficulties have arisen in the Central Clinic. Several activities are now carried on in premises apart from Central Clinic and the time has arrived when this building (opened in 1929) is too small for our expanded service.

TUBERCULOSIS

Dr. B. Coutts, Chest Physician, states :—

“There has been a slight decrease in the incidence of tuberculosis in school children in 1958. The number of new cases totals 13 as compared with 22 in 1957. Unfortunately one death occurred in this group.

B.C.G. vaccination was continued of school children in contact with tuberculosis patients and 71 were vaccinated compared with 95 in 1957 and 138 in 1956.

Of the 604 school children who have had B.C.G. vaccination since the scheme started, not one, so far as I am aware, has developed tuberculosis”.

LUNG DISEASE (other than Tuberculosis).

Since 1955 special note has been made of incidence of Non-Tuberculous lung conditions such as Asthma and Bronchiectasis in school children. For this purpose Treatment and Observation cases are always lumped together but the writer is convinced that this distinction into two groups does not entail any constant difference. *as*

The following table shows the position regarding Lung Diseases (other than Tuberculosis) during recent years :—

Year	No. of R.M.I.	Total Cases	Percentage
1956	11,334	305	2.7%
1957	10,321	329	3.3%
1958	10,928	300	2.7%

(The total numbers of asthmatic pupils in Middlesbrough, in all age groups, including Handicapped Pupils is 119 boys and 47 girls).

SCABIES.

We encountered an increase of Scabies during 1958. Altogether 96 cases were treated.

HEALTH AND EMPLOYMENT.

At the examination of leaver pupils, special attention is given to the child's capacity for employment. Close contact is maintained with the Youth Employment Bureau.

CONVALESCENCE.

We are now able to send children for convalescence to Danby Convalescent Home by arrangement with Health Department. The number sent during 1958 was 17.

VERRUCAS.

We have had to give much attention to this troublesome condition during 1958. Pupils with verrucas are sent for treatment to chiropodists. The numbers of such pupils tend to increase and verrucas are found in children of all ages but they are more common in older pupils, and in girls (possibly because they undertake more barefoot activities), and in new school premises (again possibly because more activities are undertaken without plimsols).

No. of Pupils Treated.

Year	Boys	Girls	Total
1955	47	112	159
1956	67	121	188
1957	58	146	204
1958	73	168	241

WORK OF SCHOOL NURSES : (information requested by Chief Medical Officer, Ministry of Education) (1).

Report by Superintendent Nurse K. M. Crapper :—

“(a) IN SCHOOLS.

- (1) Routine Cleanliness Surveys at least three times a year (more frequently in some schools), followed by re-inspection of pupils found to be in an unsatisfactory condition.
- (2) Assistance at Routine Medical Inspections, Diphtheria Immunisation and B.C.G. Vaccination.
- (3) Audiometer Tests for Deafness.
- (4) Special visits respecting infectious diseases.
- (5) Examination of pupils before departure for Hexham Camp.

(b) IN CLINICS.

- (1) Minor Ailment Clinics.
- (2) Aural Clinics including Specialist's Clinic.
- (3) Refraction Clinics.
- (4) Orthopaedic Clinics.
- (5) Treatment of Scabies.
- (6) Ultra Violet Ray Treatment.
- (7) Assistance at Diphtheria Immunisation, Polio Vaccination and B.C.G. Vaccination.

(c) VISITS TO HOMES. Total number of visits—4077.

- (1) Visits to children notified as suffering from chicken-pox, measles, whooping cough and mumps.
- (2) To advise parents concerning unsatisfactory conditions found at Routine Cleanliness Surveys.
- (3) Visits to Children following operative treatment for ear, nose and throat conditions.
- (4) Visits in certain cases of long absence from school.
- (5) Visits to ascertain home circumstances of Handicapped Children.

(d) Nurses keep daily statistical records of their work.

Since the war, 25 new school departments have been opened in this rapidly developing town. The geographical situation of Middlesbrough allows of expansion towards the south and east, with the result that all new schools are situated in these two areas. Thus, it has been necessary to revise allocation of schools to nurses on several occasions.

Our work is more difficult in these new housing estates than in older, congested areas. There are relatively more young children who need more care than older ones; the home visiting is more time consuming because the population is more dispersed; also, parents who are out from home tend to remain out for much longer periods. It even takes more time for the nurse attached to a new estate area to travel back to her clinic.

e) VERMINOUS CONDITIONS.

Although the total number of children found to be verminous showed a decrease in 1958, that number is still too large. In the great majority of cases nits only were found in children counted verminous. The number of pupils compulsorily cleansed under Section 54 of Education Act was fifteen; parents of five children were reported as liable to prosecution but, in the event, no prosecution was taken. In any case, the results of prosecution in former years have been disappointing.

Nurses give much time to advising mothers in some cases, and to demonstrating technique of disinfestation. Co-operation is not always easy to secure. In the worst cases, causation is complex—never financial stringency or poor home conditions alone! Other frequently associated factors are poor intelligence, ill-health and lack of endeavour.

Towards the end of 1958, our method of compiling statistical return of pupils found verminous at cleanliness inspections was altered in order to give a clearer picture of situation. Since then monthly percentage of pupils found verminous has ranged from 4.9% to 7.9%—depending on predominant type of school inspected, age groups and other factors”.

Statistical return of work in connection with verminous children is given on page 47.

(1) Health of the School Child (1958) P.43.H.M.Stat. Office.

SECTION IV.

MORTALITY OF SCHOOL CHILDREN.

I am indebted to the Health Department for the following Table:

REGISTERED DEATHS OF CHILDREN (5-15 years) during 1958 :
(corrected by inward and outward transfers):

Cause of Death	No. of Deaths		
	M	F	Total
T.B. Meningitis	—	1	1
Acute Pancreatitis	1	—	1
Peritonitis	—	1	1
Sturge Weber Syndrome	—	1	1
Malignant Neoplasms	—	1	1
Hydronephrosis	1	—	1
Motor Vehicle Accidents	1	—	1
All other accidents	3	—	3
	—	—	—
	6	4	10
	==	==	==

SECTION V.

ARRANGEMENTS FOR TREATMENT.

1. Physical Welfare of Children.

(a) MINOR AILMENTS.

Attendances in recent years have been as follows :—

1955	...	52,512	1957	...	39,067
1956	...	46,417	1958	...	36,953

The decrease in attendance, in recent years, is due to diminished prevalence of diseases for which school children formerly attended our clinics and also to treatment facilities provided by the National Health Service. A third possibility now merits consideration which is alteration in the type of individual disease. During 1958, for the first time in a number of years, the largest single group of cases treated consisted of skin diseases—4,055. Next point of numerical importance came minor injuries—3,866—185 of which were referred to the Casualty Department, General Hospital, Middlesbrough. This is perhaps an appropriate place to mention the great debt of gratitude which we owe to this hospital through the years for the assistance which they have so willingly given us.

(b) AURAL CLINIC.

A School Medical Officer held a weekly clinic to which special Ear cases were referred. At this Clinic, the total number of examinations was 789. The number of pupils was 520.

Mr. Marshall saw cases weekly at North Riding Infirmary. The number of examinations was 213 ; number of children was 162.

Group Audiometer Survey.—During the greater part of 1958 this survey was continued with 2120 Weston Electric Group Speech Audiometer in the age groups 8 yrs +, 9 yrs +, and 11 yrs +. Children who failed test were examined at the Aural Clinic. The number of pupils tested was 3199.

In October 1958 we started to do Sweep Check tests with the Amplivox Portable Pure Tone Audiometer (Model 70). Now each nurse tests 5 yr + pupils in her own school. This survey is not rapid but we are finding the results reliable, and even among these young children very few indeed fail to co-operate. Nevertheless, a subjective element is still involved in the test. The number of pupils tested at the end of 1958 was 702.

(c) OPHTHALMIC CLINIC.

Ophthalmic Surgeons at North Riding Infirmary undertook four sessions weekly. During 1958 they examined 1454 pupils. Spectacles were prescribed for 1180 of these cases.

(d) ORTHOPAEDIC CLINIC.

Dr Crockatt (or Dr Adamson) attended fortnightly. The following is a brief numerical record of the year's work :—

Number of new cases seen by Orthopaedic Surgeons :

School Children	...	...	...	...	...	238
Pre-School Children	...	...	...	...	...	61

Number of old cases seen by Orthopaedic Surgeons :

School Children	...	...	...	...	...	150
Pre-School Children	...	...	...	...	...	49

Number of treatments by Orthopaedic Sister :

School Children	...	...	...	...	...	461
Pre-School Children	...	...	...	...	...	44

(e) TONSILS AND ADENOIDS.

Details of the frequency of Tonsillectomy among children examined at Routine Medical Inspections are given on page 58. The total number of pupils in all age groups who had operations, under this heading, during 1958 was 879—only a small minority of these cases was referred by the School Health Service.

(g) SPEECH CLINIC.

Miss Knight, Speech Therapist, reports :—

“The statistical report shows that the numbers on roll and attending the Speech Therapy Centre have steadily increased, fluctuating month by month but finally, after all withdrawals have been made, leaving one hundred and eighty six in weekly attendance.

With the return to the Speech Therapy service in September, 1958, of Mrs McDonald, considerable and valuable help has been available. Mrs McDonald attends only part time on two days of each week for four sessions of three hours each. More help is still urgently needed to cope with the ever growing waiting list.

Visitors to the Clinic have included two persons who are hoping to enter as students for the profession.

The greater part of the work is carried on at the Central Speech Clinic, 154 Borough Road, but weekly sessions are also held at Linthorpe, Marsh Road and Burlam Road Schools. These outside clinics are organised as an effort to prevent long distance travel and to reduce the time of pupils out of normal school sessions.

The situation of the Central Speech Clinic on the top floor is not at all suitable; some children have to be carried up two flights of stairs; rhythmic exercises are an essential part of the treatment of the inhibited child and the noise tends to distract other people in the rooms below; the rooms themselves are adequate but the position is the main difficulty causing some anxiety.

As always, the liaison between all concerned in the recommendation and in the treatment of the children, namely, doctors, teachers, parents and therapists leaves nothing to be desired and is very much appreciated at the Speech Clinic”.

STATISTICAL REPORT SPEECH CLINIC.

Children on Roll 1st January, 1958	Boys.	Girls	Tota
Stammerers	47	15	62
Sigmatism (Lateral and Dental)	4	1	5
Dyslalia (inc. simple and multiple)	9	7	16
Cleft Palate (post operational) ...	6	3	9
E.S.N. (Educationally Sub-Normal)	23	5	28
Pre School	10	5	15
Spastic (cerebral palsy)	—	2	2
Mixed Symptoms	10	5	15
	<hr/>	<hr/>	<hr/>
	109	43	152
	<hr/>	<hr/>	<hr/>

Admitted During the Year, 1958 :	Boys	Girls	Total
Stammers	21	7	28
Sigmatism (Lateral and Dental)	8	5	13
Dyslalia	30	12	42
Cleft Palate (post operational) pre school	1	—	1
Polypus (post operational) ...	1	—	1
Spastic (cerebral palsy)	1	—	1
E.S.N. (Educationally Sub-Normal)	1	2	3
Rhinophonic	—	1	1
	<hr/>	<hr/>	<hr/>
	63	27	90
	<hr/>	<hr/>	<hr/>

Discharged Adjusted During the Year 1958:	Boys	Girls	Totals
Stammerers	3	—	3
Sigmatism (Lateral and Dental)	3	1	4
Dyslalia	4	5	9
Mixed symptoms	4	2	6
Cleft Palate (post operational) ...	—	1	1
E.S.N. (Educationally Sub-Normal)	4	2	6
	<hr/>	<hr/>	<hr/>
	18	11	29
	<hr/>	<hr/>	<hr/>

			Boys	Girls	Totals
Withdrawn by Parents	...	...	4	1	5
Refused treatment	...	...	2	1	3
Left District	...	...	1	—	1
Left School	...	...	8	1	9
Withdrawn—unsatisfactory attendance	...	...	5	1	6
Withdrawn—Now attending Child Guidance Clinic	...	...	—	1	1
Withdrawn—Now attending School for the Deaf...	...	...	1	—	1
Withdrawn—Cleft Palate—pre School (parent unable to bring him due to domestic reasons)	...	...	1	—	1
			<hr/>	<hr/>	<hr/>
			22	5	27
			<hr/>	<hr/>	<hr/>

Total No. of Cases During the Year	...	...	242
Total No. of Discharges	...	...	56
Total No. of Treatments	...	...	4,790
Total No. of Children on Roll 31st December, 1958			186

NOTE :

As in previous years, the cases headed “mixed symptoms” are still classified for clinical purposes under the major defect.

2. Mental Welfare of Children.

CHILD GUIDANCE CLINIC.

Mr. Freyman, Educational Psychologist, reports :—

“The appreciable fall in the number of children who attended was due to the appointment by the Education Committee of one full-time and one part-time peripatetic teacher for retarded readers in the junior schools. This service, which it is hoped will be increased in 1959 has taken care of a number of children who otherwise might have found their way into the child guidance clinic. We shall of, course, continue to accept a small number of children whose reading attainment may improve by attending here.

This year again the educational psychologist held some short courses in educational psychology for teachers at the child guidance clinic. Two groups of teachers from different types of school, including for the first time a Grammar School and the Technical School, met five times each during November and December. Twenty-one head and assistant teachers took part.

Three more courses of a similar type have been planned to be held in the Spring Term of 1959.

An article by the educational psychologist on a small scale study of the clinic's experience with the enuresis bell apparatus (described in last year's report) has been accepted for publication in 1959 by the editor of the "The Medical Officer".

The educational psychologist attended a refresher course on "The Handicapped Child" arranged in January by the Committee of Professional Psychologists and our social worker took part in the fourteenth Inter-Clinic Conference on "The Residential Care of Disturbed Children", in March.

Both the educational psychologist and the social worker assisted with the General Examination on which allocation to Secondary Schools is based.

A number of talks were given to various organisations in the town.

Thanks are due again for the help we have received from Dr. Cuthbert and his staff at St Luke's Hospital, in the cases of children who needed psychiatric or neurological examination and treatment".

The technique of child guidance is not as yet on a strictly scientific basis. It is, at present, an affair in which we depend to some extent, on intuition. This, in itself, gives no cause for discouragement since a similar state of affairs obtains in other activities in which practical arts make use of physical sciences.

In such circumstances, however, clash of opinion is to be expected and the approach of the individual worker will be conditioned by his philosophical beliefs.

At times, one encounters prejudice against child guidance clinics. Furthermore, much research work in the psychological field is still needed.

Child Guidance Clinic—Annual Return, 1958.

ATTENDANCES AT CLINIC:

Children	...	...	882
Parents/Guardians	...	...	343

REASONS FOR REFERRAL:

1. Testing & assessment only	7
2. Educational Retardation	30
3. Anti-Social Behaviour	37
4. Enuresis	17
5. Other habit disorders	10
6. Fears, withdrawal tendency etc.	7

VISITS BY CLINIC STAFF:

Home...	...	...	176
School	...	...	179
Others	...	...	26
Lectures & Teachers Courses	...	...	15

ANALYSIS OF REFERRAL:

1. School Medical Officer	35
2. Head Teachers ...	57
3. Director of Education	5
4. General Practitioners	2
5. Probation & Children's Officer	4
6. Parents	3
7. Remedial Teachers	1
8. Youth Employment Officer	1

No. of New Cases	...	...	...	...	108
Cases closed during year	...	...	...	...	104
Case load at beginning of year	...	...	...	...	58
Case load at end of year	...	...	...	...	62

ANALYSIS OF CASES CLOSED :

1. Improved satisfactorily	...	...	...	43
2. No more improvement likely by continued attendance	...	...	...	15
3. Testing and assessment only	...	...	...	13
4. Non co-operation	...	...	...	8
5. Parents do not wish to proceed	...	...	...	9
6. Referred elsewhere	...	...	...	14
7. Left District	...	...	...	2

SECTION VI.—HANDICAPPED PUPILS.

A. Blind Pupils.

The total number of such pupil's was 3, and they attended residential schools as follows :—

Royal Victoria School for the Blind, Newcastle-upon-Tyne	... ..	1 boy
St Vincent's School for the Catholic Blind and Partially Sighted, Liverpool	... ..	1 boy
Royal Blind School, Edinburgh	... ..	1 girl

B. Partially Sighted Pupils:

The total number of such pupils was 7, and they attended schools as follows :—

St Vincent's School for the Blind and Partially Sighted, Liverpool	... ..	2 girls
Preston School for the Partially Sighted	... ..	2 boys
Hethersett Training Establishment, Reigate	... ..	1 boy
East Anglian School for the Blind and Deaf, Gorleston-on-Sea	... ..	1 girl
Ordinary Day School, Middlesbrough	... ..	1 girl

C. Deaf Pupils :

The total number of such pupils was 23, and they attended schools as follow :—

Middlesbrough Day School for the Deaf	... ..	8 boys 9 girls
St John's Residential School for the Deaf, Boston Spa, Yorks	... ..	2 boys
Royal Residential School for the Deaf, Old Trafford Manchester	... ..	1 boy
Burwood Park Technical School, Walton-on-Thames	... ..	1 boy
Attending Ordinary Schools (awaiting admission to the Middlesbrough Day School for the Deaf)	... ..	1 girl
Under School age (awaiting admission to the Middlesbrough Day School for the Deaf)	... ..	1 girl

D. Partially Deaf Pupils:

The total number of such pupils was 14, and they attended schools as follows:—

Middlesbrough Day School for the Deaf	...	8 boys
		5 girls

Ordinary Day School, Middlesbrough	1 boy
------------------------------------	-----	-----	-------

Miss Nixon, Headmistress, Day School for Deaf reports :

“Numbers remain constant—eighty in the school of whom twenty-nine are partially deaf and the rest are profoundly deaf—in other words, are quite deaf to speech though they may be able to hear sounds, high or low, outside the speech range.

An important step forward was taken when all the old heavy and bulky “Medresco” hearing aids in the school were withdrawn and replaced by the new transistors. These are equally efficient in use but are so small and light that they can be worn easily and comfortably by even the smallest children. Those supplied to the school are special ones fitted with an induction coil ready for use with the new induction loop hearing aid system when it is installed in the classrooms.

The children are all delighted with their new aids. We could wish however that they were a little stronger in construction. The cases are made of bakelite, very light in weight but extremely brittle and the ear pieces easily come adrift and get lost. All the same, we are thankful for them.

One boy, who attends Stainsby School part-time, continues to do well. Another boy has been successful in the written and oral parts of the examination for admission to the Burwood Park Technical School and will start there in September.

It is hoped to start classes in English, Arithmetic, Physical Training and Dancing for our Deaf school leavers in September. Preliminary enquiries suggest that the classes will be well supported”.

E. Educationally Sub-Normal Pupils:

The following arrangements were made for the education of these children:—

1. Residential Special Schools:

Besford Court R.C. Special School, Worcester ...	2 boys
Aldwark Manor Boarding Special School, Alne, nr York.	6 boys
High Close (E.S.N.) School, Wokingham, Berks	1 girl
Allerton Priory R.C. Special School, Liverpool ...	1 girl
Crowthorn Residential Special School nr Bolton...	1 boy 1 girl
Pield Heath House R.C. Special School, Hillingdon	2 girls
Thingwall Boarding Special School, Liverpool ...	1 girl
Fyling Hall School, Robin Hood's Bay	1 boy
Springhill School, Ripon	1 boy
Hilton Grange School, Leeds	1 boy

2. Burlam Road Day (E.S.N.) School, Middlesbrough

101 boys
68 girls

3. Ordinary Schools (Backward Classes) 3 boys

4. Awaiting Admission to Residential Schools:

(at present attending ordinary schools)	3 boys
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5. Awaiting admission to Burlam Road (E.S.N.) School:

(at present attending ordinary schools)	15 boys
	11 girls

6. Home Tuition (Child Classified as E.S.N. and

Physically Handicapped)	1 boy
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Details of examinations under this heading during 1958 are as follows :—

1. Number of Pupils ascertained as E.S.N. ...	43
2. Number of Pupils found not to be E.S.N. ...	6
3. Number of cases in which decision was deferred	26
4. Number of E.S.N. pupils re-examined (11 yrs + and 14 yrs +).	43
5. Number of pupils transferred to ordinary schools (backward class) as a result of this re-examination	1

Education Act 1944 Section 57 :

1. Number of cases ascertained as Ineducable (Section 57/3). (Parents of one pupil appealed to Ministry of Education but their appeal failed).	9
2. Number of pupils notified for Supervision under Section 57 (5)	7

Education (Miscellaneous Provisions) Act 1948, Section 8

Number of cases reviewed in which report as ineducable cancelled (This pupil was ascertained to be E.S.N.)	1
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MIDDLESBROUGH DAY SCHOOL FOR E.S.N.

Report by Mr J. Woodhouse, Headmaster of Burlam Road School :

“This school for Educationally Sub-normal Children had 146 pupils on roll at the beginning of January, 1958. During the year 35 children left school for the reasons outlined below, and 23 were admitted, leaving a total of 134 pupils on roll at the end of 1958. Of these 82 were boys and 52 girls.

Transfer to Residential School	3
Transfer to Approved School	1
Transfer to Secondary Modern School ...	2
Transfer to Aycliffe Hospital	2
Transfer to Training Centre	1
Incapable of receiving education at school ...	2
Left on attaining age of 16 years	24

The distribution according to Chronological Age on December 31st, 1958, including School Leavers, was as follows :—

Age		Boys	Girls	Total
6— 7 years	...	1	1	2
7— 8 „	...	2	3	5
8— 9 „	...	11	3	14
9—10 „	...	16	5	21
10—11 „	...	14	9	23
11—12 „	...	9	7	16
12—13 „	...	9	2	11
13—14 „	...	7	9	16
14—15 „	...	9	8	17
15—16 „	...	6	8	14
	Totals	84	55	139

The distribution according to Intelligence Quotient was as follows :—

I.Q.		Boys	Girls	Total
40—45	...	1	3	4
46—50	...	3	—	3
51—55	...	10	6	16
56—60	...	13	10	23
61—65	...	12	16	28
66—70	...	21	11	32
71—75	...	15	3	18
76—80	...	6	4	10
81—85	...	3	2	5
	Totals	84	55	139

Some children with I.Qs of 50 and below are likely to prove ineducable after an adequate trial period in school. Others at the top level of distribution may be returned to the normal school when the additional disabilities of environment, temperament and physique have been sublimated or resolved. The child's Intelligence Quotient suggests the rate at which he should progress and indicates the probable limits of his attainments.

As measured by Schonell's Graded Reading Vocabulary Test the following are the figures for Mechanical Reading Ages for pupils in the Junior and Senior Departments of the School :—

Reading Age		Boys	Girls	Total
Non-Reader	...	13	2	15
5— 6 years	...	11	4	15
6— 7 „	...	16	12	28
7— 8 „	...	18	17	35
8— 9 „	...	8	7	15
9—10 „	...	1	2	3
10—11 „	...	2	4	6
11—12 „	...	2	—	2
		<hr/>	<hr/>	<hr/>
	Totals	71	48	119
		<hr/>	<hr/>	<hr/>

It is generally agreed that Reading should normally begin when the child has a Mental Age of approximately $6\frac{1}{2}$ years. Chronological Ages in the Preparatory Class range from 6 to 8 years, and Mental Ages from 3 to 6 years so that none of the pupils in this group is ready to read. Children admitted in September at the beginning of the School Year are generally Non-Readers.

Most of the pupils in school have one, or more, additional disability imposed on their innate lack of intelligence. These disabilities include unfavourable environment, a physical handicap, temperamental instability, speech defect, epilepsy, and partial deafness.

Active co-operation with the school Medical Service and the Child Welfare Department is invaluable in the diagnosis and treatment of these disabilities and is readily available. Miss Knight and Mrs. McDonald, Speech Therapists, visit the school every Thursday morning to give treatment to children suffering from severe defects of speech.

An important function of the school for E.S.N. Children is to hold the mirror as it were to normality except in standards of attainment. This is done by the following means :—

1. Organised visits to Concerts, the Ballet, Cinema and Circus.
2. Organised visits to the Museum, Art Gallery, and a Farm.
3. An Evening Institute attached to the school.
4. Participation in Country Dancing, Swimming and Cricket and Football Matches against other schools.

The Pupils on leaving are absorbed into simple, routine jobs in local industries. The position with regard to the employment of handicapped children deteriorated during the latter part of the year and several of the most severely handicapped with additional disabilities imposed on their innate lack of intelligence were not found work on leaving school.

At the end of 1958, 23 children were awaiting admission to Burlam Road, but arrangements had already been made to form a new class at the beginning of the Easter Term, 1959”.

F. Epileptic Pupils.

The total number of such pupils was 4, and they attended the following schools :—

St Elizabeth's School & Home for Epileptics,					
Much Hadham, Herts.	...	...	...		1 boy
					1 girl
Awaiting Residential School Accommodation—					
at present in ordinary school	...	...	...		1 girl
Ordinary School	...	...	...	...	1 boy

The total number of epileptic pupils successfully attending maintained schools in 1958 was :—

- (a) 27 boys and 7 girls with Petit Mal.
- (b) 26 boys and 37 girls with other epilepsies.

The type of schools attended were as follows :—

	Petit	Mal.	Other		Total
			Boys	Girls	
Primary & Secondary Modern	21	5	22	34	82
Secondary Grammar	2	—	3	—	5
E.S.N. School	4	1	—	3	8
School for the Deaf	—	1	1	—	2
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	27	7	26	37	97
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

G. Maladjusted Pupils.

The total number of such pupils was 9, and they attended schools as follows :—

Wennington Hall Boarding Special School, Nr Lancaster	...	...	...	...	1 boy
Cotswold Chine Home-School, Nr Stroud	...	...	...	...	1 boy
Fyling Hall School, Robin Hood's Bay	...	...	...	...	3 boys
Ordinary School—awaiting admission to a resi- dential school	...	...	...	...	1 boy
Ordinary Schools	...	...	...	...	2 boys
Home Tuition	...	...	...	...	1 girl

H. Physically Handicapped Pupils:

The total number of such pupils was 63, and the following arrangements were made for their education :—

1. Residential Schools:

Barleythorpe Hall School, Oakham, Rutland	...	...	...	...	1 girl
Children's Convalescent Home, West Kirby	...	...	...	...	1 girl
					1 boy
St Joseph's Hospital School, Liverpool	...	...	...	...	1 girl
Victoria Home, Bournemouth	...	...	...	...	1 girl
Welburn Hall Boarding Special School Kirbymoorside	...	...	...	...	1 boy
					4 girls

St John's Open Air School for Boys, Woodford						
Bridge						1 boy
Ian Tetley Memorial Hospital Home, Harrogate ...						2 boys
Coney Hill Home for Crippled Children, Margate						1 boy
St Rose's R.C. Special School, Stroud						1 girl
2. Home Tuition						7 boys 5 girls
3. Awaiting Residential School Accommodation:						
Not attending School						1 boy
Receiving Home Tuition						2 girls
Attending Ordinary Schools						2 boys 1 girl
Burlam Road (E.S.N.) School as Interim Measure ...						1 boy
4. Attending Ordinary Schools						11 boys 16 girls
5. In Hospital Schools						2 boys

CEREBRAL PALSY.—The total number of pupils on school rolls in 1958 suffering from Cerebral Palsy was 27 boys and 21 girls. Arrangements for their education were as follows :—

	Boys	Girls
Primary & Secondary Modern Schools	16	12
Secondary Grammar Schools ...	2	—
School for E.S.N.	2	5
School for Deaf	3	1
Awaiting Residential School (at present in ordinary school)	1	—
Home Teaching	—	1
Adela Shaw Hospital	1	—
Residential School	1	2
Speech Clinic (examination not com- plete)	1	—
(not at school)	—	—
	27	21

J. Delicate Pupils:

The total number of such pupils was 21, and the following arrangements were made for their education :—

1. Residential Schools:

St Patrick's Open Air School, Hayling Island, Hampshire	...	...	...	...	1 girl
Ingleborough Hall School, Clapham, Yorks	...				1 boy
St Rose's R.C. Special School, Stroud	...	...			1 girl
Laleham School, Margate	...	...	...	...	1 boy
Redworth Hall School, Heighington, Co. Durham	...				1 boy

2. Home Tuition

...	3 boys
-----	-----	-----	-----	-----	--------

3. Attending Ordinary Schools and awaiting Residential School Accommodation

...	...	1 girl
		1 boy

4. Attending Ordinary Schools

...	2 boys
			9 girls

(See Appendix 2 for further details of Physically Handicapped and Delicate Pupils).

SECTION VII.—MISCELLANEOUS.

A. Camp School (Residential).

Pupils from Secondary Modern Schools and Senior Pupils from Primary Schools were sent to a residential camp school at Dukeshouse Wood, Hexham, in charge of teachers, for periods of a fortnight. All pupils were inspected by one of our staff before departure.

The number of pupils who went to camp during 1958 was 963 (513 boys and 450 girls).

B. B.C.G. Vaccination of 13 Year Old Pupils:

Number Tuberculin Tested	Number Negative	Number Vaccinated	Number Absent
22	15	13	3

Early in 1958 we abandoned B.C.G. Vaccination because of technical difficulty in combining it with Poliomyelitis Vaccination.

C. Diphtheria Immunisations:

During 1958, our returns for Diphtheria Immunisation were as follows :—

First Injections	...	...	...	...	375
Second injections	...	...	...	...	316
Booster injections	...	...	...	...	752
Total completed immunisations	...	...	...	...	1,038

Diphtheria immunisation was abandoned at the end of May owing to difficulties encountered in combining it with Poliomyelitis Vaccination.

No case of Diphtheria occurred among school children in 1958.

D. Disabled Persons' Act:

Number of pupils placed on Disabled Persons' Register:—

8 boys; 9 girls.

E. Employment:

Number of pupils registered for part-time employment:

465 boys; 115 girls.

Number of pupils issued with licenses to appear in public entertainment:

1 boy; 44 girls.

F. Health Education:

Instruction on Health matters is given by medical officers and nurses in the course of routine duties.

G. Infectious Diseases:

During 1958 the incidence of infectious diseases among school children (5-15) was as follows:—

				Male	Female	Total
Food Poisoning	...	...		1	—	1
Scarletina	...	...	...	91	88	179
Measles	...	...	...	198	165	363
Whooping Cough	...	...		8	12	20
Chicken Pox	...	...	...	239	218	457
Poliomyelitis (Non-Paralytic)				3	3	6
Dysentery	...	...	...	58	44	102
Meningococcal Infections	...			—	2	2
Acute Primary Pneumonia				5	6	11
Influenzal Pneumonia...	...			1	1	2
Pulmonary T.B.	...	...		4	8	12
Other T.B.	...	...		—	1	1
				<hr/>	<hr/>	<hr/>
				608	548	1,156
				<hr/>	<hr/>	<hr/>

H. Mass Radiography:

I am indebted to Mr. J. J. Walsh, Organising Secretary, i.c. Mass Radiography Unit, for the following statistical report :

“Number of school children x-rayed, showing number recalled for Large Film and referred to Chest Clinic.

	Boys	Girls	Total
x-rayed on Miniature Film ...	437	474	911
Recalled for Large Film ...	10	10	20
Referred to Chest Clinic ...	5	5	10

Abnormalities Found:

Diagnosis	Boys	Girls	Total
*Pulmonary Tuberculosis—Healed no further action required	1	1	2
Large Heart	1	—	1
Pneumonia	1	—	1
Bronchitis	1	—	1
	<hr/>	<hr/>	<hr/>
Total	4	1	5
	<hr/>	<hr/>	<hr/>

*Two cases of healed Pulmonary Tuberculosis were diagnosed on the Miniature Film”.

K. Physical Education:

I am indebted to the Director of Education for the following report :—

“PRIMARY SCHOOLS AND SECONDARY GIRLS’ SCHOOLS:

Schools suffered rather more than usual on account of bad weather and were unable to hold many of their usual matches and rallies. The hockey rally was abandoned after two attempts and the rounders rally for Junior schools was marred by a torrential downpour, causing everyone to hurry for shelter. This rally was, however, completed during the following week, schools showing great enthusiasm as usual. The matches were keenly contested and gave plenty of evidence of good coaching.

Indoor work in Physical Education is progressing and teachers are quick to take advantage of all available facilities. Several teachers' courses were organised, one in Country Dancing, and a weekend course in movement was extremely well supported by some 70 Junior School Teachers (40 men and 30 women) and proved very beneficial. During the year several short film sessions were held showing work in various types of schools under varying conditions; one such film session being given to the Tees-side Branch of the Special Schools Association.

Schools continue to make good use of the fields after school hours, and many inter-school matches are arranged in both Primary and Secondary stages.

On a Saturday afternoon in June the Primary Schools again enjoyed a Country Dance Party in delightful weather, in Stewart Park.

SECONDARY BOYS' SCHOOLS:

Continued enthusiasm was shown for all Physical Education activities both in school and after school hours. Two courses for teachers were organised, one dealing with strength and fitness training and the other with basic gymnastics.

In Association Football the Middlesbrough Intermediate team reached the semi final of a North East competition, and one boy represented the Yorkshire Grammar Schools' team. Fifteen schools took part in a new 5-a-side Schools' tournament which was included in the town's Pleasure in Parkland programme. During the season an extensive F.A. Coaching scheme was arranged.

Schools playing Rugby arranged inter-school fixtures for a wide age range, and one boy was selected to play in the English Schools' XV against Wales.

The Schools' Boxing Association had a very good season and eight boys gained Yorkshire championships and four were runners-up. Four boys reached the semi-final stage of the Schools' National Championships.

Indoor activities made good progress during the year and with the opening of new Secondary Schools better facilities became available for more pupils. A newly formed Middlesbrough Schools' Gymnastics Association held its first annual championships.

Interest in cross-country running is growing steadily and towards the end of the year 12 schools took part in many friendly runs in preparation for the 1959 season.

During the Summer term the usual inter-school Cricket matches and competitions were held. Three Middlesbrough boys were selected to play for the Durham County Schools' team, and one represented the North of England Schools' XI.

SWIMMING (Boys and Girls):

Enthusiasm and interest in swimming has grown. This year the Girls' Secondary Schools held their first Swimming Gala which was a great success. The number of children in the Primary Schools due to have swimming lessons during the Summer term were so large that as well as the full-time use of the Middlesbrough Swimming Baths, use was made of the Thornaby Baths on four afternoons per week. The after-school swimming time each day from 4.0 p.m. —6.0 p.m. was fully used by an increased number of schools. The increased number of Life Saving Awards, spread over a greater number of schools, testifies to the good use made of these out-of-school swimming periods.

The Middlesbrough Boys' Swimming Team was second in the Northumberland and Durham Schools' Swimming Gala, and one boy gained a National Standard in the English Schools' Championship.

ATHLETICS (Boys and Girls):

The Girls' Secondary Schools held another successful Sports Meeting on the North Ormesby Playing Field when keen competition was shown.

The Boys' Secondary Schools held four divisional Sports Meetings during the summer term and a Town Championship meeting towards the end of the term. Two boys represented Yorkshire in the Schools' National Athletic Championships, one of whom gained second place in the senior mile.

GENERAL :

A great deal of work is put into all out-of school activities, not only on the Playing Fields and at the Swimming Baths but also in the various Clubs and indoor activities held in the schools and organised by members of the school staffs. Great credit is due to all teachers who give so much of their time voluntarily to these activities.

Thanks are due to the Parks Department for their co-operation in the arrangements for out-door activities, such as tennis, hockey and netball for some of the Girls' Schools, which enables a greater number of girls to play these games than would otherwise be possible".

L. Poliomyelitis Vaccination:

This was a special feature of our work during 1958.

(1) Total number of injections of Polio Vaccine given by our medical officers in school clinics	8,200
(2) Total number of sessions of Polio Vaccination done by our medical officers in Health Department	27

SECTION VIII.

DENTAL INSPECTION AND TREATMENT, 1958.

Mr J. Auton, Principal School Dental Officer, reports :—

“The difficulty of inadequate staffing showed no improvement during the year, in fact the position actually deteriorated.

The year started with a dental staff of one full-time officer (Principal Dental Officer) and two part-time officers. During the first quarter of the year, one part-time officer tendered her resignation, leaving one part-time dental officer only, and this state of affairs continued until the last month of the year when a replacement part-time officer commenced duty, contributing a few sessions during the month of December.

About the beginning of the last quarter of the year the Principal Dental Officer was taken ill, and was unable to undertake duties up to the end of the year. In view of the shortness of staff a pleasing feature noted during routine dental inspections in the schools, was the steadily increasing amount of work done for children by private dentists in recent years, particularly as regards conservation treatment.

In the early days of the National Health Service, when entirely free treatment was obtainable by adults as well as children, it would appear that private dentists were too busy treating adult patients to devote much time to treating children. Since the imposition of a small fee for adult treatment, there is evidence of more time now being available for the treatment of children. There were 112 cases referred to the Panel of Consultants, these being in need of orthodontic treatment or requiring dentures”.

MINISTRY OF EDUCATION.

MEDICAL INSPECTION AND TREATMENT RETURN FOR THE YEAR ENDED 31st DECEMBER, 1958.

Number of pupils on registers of maintained and assisted primary and secondary schools in January, 1958 31,035

PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS. (including NURSERY AND SPECIAL SCHOOLS).

TABLE A.—PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected (By year of Birth)	Number of pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)
1954 and later	200	199	99.50	1	0.50
1953	1989	1975	99.30	14	0.70
1952	687	675	98.25	12	1.75
1951	70	69	98.57	1	1.43
1950	1902	1840	96.74	62	3.26
1949	867	831	95.85	36	4.15
1948	31	30	96.77	1	3.23
1947	401	401	100	—	—
1946	1682	1675	99.58	7	0.42
1945	619	618	99.84	1	0.16
1944	49	48	97.96	1	2.04
1943 and earlier	2431	2363	97.20	68	2.80
Total	10,928	10,724	98.13	204	1.87

TABLE B.—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS.
(excluding Dental Diseases and Infestation with Vermin).

Age Groups Inspected (By year of Birth)	For defective vision (excluding) squint)	For any of the other conditions recorded in part II	Total individual pupils
(1)	(2)	(3)	(4)
1954 and later	3	23	25
1953	20	296	215
1952	6	62	67
1951	1	4	5
1950	89	139	218
1949	38	61	98
1948	3	6	9
1947	32	24	55
1946	101	137	237
1945	36	53	89
1944	1	3	4
1943 and earlier	146	86	231
Total	476	894	1253

TABLE C.—OTHER INSPECTIONS.

Number of Special Inspections	...	6,298
Number of Re-inspections	...	2,296
Total	...	8,594

TABLE D.—INFESTATION WITH VERMIN.

(a)	Total number of individual examinations of pupils in schools by school nurses or other authorised persons	121,385
(b)	Total number of individual pupils found to be infested	4,143
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	42
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	15

PART II. DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR
TABLE A.—PERIODIC INSPECTIONS.

Defect Code No. (1)	Defect or Disease (2)	Periodic Inspections:							
		Entrants		Leavers		Others		Total	
		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
4.	Skin	37	74	12	30	88	118	137	222
5.	Eyes a. Vision ..	30	78	100	148	346	540	476	766
	b. Squint ..	34	71	3	8	28	64	65	143
	c. Others ..	12	22	1	3	26	29	39	54
6.	Ears a. Hearing ..	18	20	4	5	25	42	47	67
	b. O. Media	13	28	5	12	20	47	38	87
	c. Other ..	5	9	3	1	28	12	36	22
7.	Nose & Throat ..	69	540	13	51	98	501	180	1092
8.	Speech	18	84	—	7	11	53	29	144
9.	Lymphatic Glands	1	194	—	15	2	269	3	478
10.	Heart	2	37	1	23	12	78	15	138
11.	Lungs	20	132	2	33	27	118	49	283
12.	Developmental :								
	a. Hernia ..	2	2	—	1	3	1	5	4
	b. Other ..	5	28	2	1	21	27	28	56
13.	Orthopaedic:								
	a. Posture ..	3	13	—	43	8	107	11	163
	b. Feet ..	11	25	9	15	23	72	43	112
	c. Other ..	18	45	2	24	25	72	45	141
14.	Nervous System:								
	a. Epilepsy	—	5	—	3	2	18	2	26
	b. Other ..	1	33	—	5	10	31	11	69
15.	Psychological:								
	a. Development	1	13	1	2	4	27	6	42
	b. Stability	14	50	1	6	8	81	23	137
16.	Abdomen	1	7	3	—	5	5	9	12
17.	Other	15	34	4	15	19	16	38	65

TABLE B.—SPECIAL INSPECTIONS.

Defect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Pupils Requiring Treatment (3)	Pupils Requiring Observation (4)
4.	Skin	1,914	806
5.	Eyes—		
	a. Vision	220	28
	b. Squint	15	2
	c. Other	334	63
6.	Ears—		
	a. Hearing	38	14
	b. Otitis Media ..	45	10
	c. Other	163	68
7.	Nose and Throat	41	35
8.	Speech	7	4
9.	Lymphatic Glands	9	12
10.	Heart	1	3
11.	Lungs	5	7
12.	Developmental—		
	a. Hernia	1	—
	b. Other	—	—
13.	Orthopaedic—		
	a. Posture	9	—
	b. Feet	17	5
	c. Other	—	4
14.	Nervous System—		
	a. Epilepsy	—	1
	b. Other	—	3
15.	Psychological—		
	a. Developmental ..	1	—
	b. Stability	2	4
16.	Abdomen	1	2
17.	Other	3,215	591

PART III.—TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (including NURSERY AND SPECIAL SCHOOLS).

TABLE A.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	334
Errors of refraction (including squint) ...	1,454
Total ...	1,788
Number of pupils for whom spectacles were prescribed	1,180

TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases known to have been dealt with
Received operative treatment:—	
(a) for diseases of the ear	25
(b) for adenoids and chronic tonsillitis ...	879
(c) for other nose and throat conditions ...	258
Received other forms of treatment ...	572
Total ...	1,734
Total number of pupils in schools who are known to have been provided with hearing aids	
(a) in 1958	17
(b) in previous years	65

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments	299
(b) Pupils treated at school for postural defects	—
Total ...	299

TABLE D.—DISEASES OF THE SKIN.
(excluding uncleanliness, for which see Table D of Part I).

	Number of cases known to have been treated
Ringworm—(a) Scalp	—
(b) Body	13
Scabies	96
Impetigo	108
Other Skin diseases	3838
Total ...	4,055

TABLE E.—CHILD GUIDANCE TREATMENT.

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics ...	166

TABLE F.—SPEECH THERAPY.

	Number of cases known to have been treated
Pupils treated by Speech Therapists ...	242

TABLE G.—OTHER TREATMENT GIVEN.

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	5,907
(b) Pupils who received convalescent treatment under School Health Service arrange- ments	17
(c) Pupils who received B.C.G. vaccination ...	13
(d) Other than (a) (b) and (c) above. Please specify :	
Chiropody	241
Ultra Violet Light	146
	<hr/>
Total (a)-(d)	6,324
	<hr/>

PART IV. DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE
AUTHORITY.

(1) Number of Pupils inspected by the Authority's Dental Officers :—

(a) At Periodic Inspections	12,318
(b) As Specials	1,245
	<hr/>
Total (1)	13,563
	<hr/>
(2) Number found to require treatment	6,147
(3) Number offered treatment	5,345
(4) Number actually treated	2,935
(5) Number of attendances made by pupils for treatment, including those recorded at 11 (h)	3,541

(6) Half days devoted to :				
(a) Periodic (School) Inspection	98			
(b) Treatment	582			
	—	Total (6)		680
(7) Fillings:				
(a) Permanent Teeth ...	765			
(b) Temporary Teeth...	27			
	—	Total (7)		792
(8) Number of Teeth filled:				
(a) Permanent Teeth ...	707			
(b) Temporary Teeth...	27			
	—	Total (8)		734
(9) Extractions:				
(a) Permanent Teeth ...	1,653			
(b) Temporary Teeth...	3,204			
	—	Total (9)		4,857
(10) Administration of general anaesthetics for extraction				1,441
(11) Orthodontics:				
(a) Cases commenced during the year				000
(b) Cases carried forward from previous year ...				000
(c) Cases completed during the year				000
(d) Cases discontinued during the year				000
(e) Pupils treated with appliances				000
(f) Removable appliances fitted				000
(g) Fixed appliances fitted				000
(h) Total attendances				000
(12) Number of pupils supplied with artificial teeth:				
(Owing to the shortage of staff in our service orthodontic work and provision of dentures carried out by arrangement with consultant dentists).				
(13) Other operations:				
(a) Permanent Teeth ...	262			
(b) Temporary Teeth...	44			
	—	Total (13)		306

MINISTRY OF EDUCATION
SCHOOL HEALTH SERVICE STAFF AND SCHOOL CLINICS.

Local Education Authority Middlesbrough County Borough,
Return for 31st December, 1958.

1. STAFF OF THE SCHOOL HEALTH SERVICE (excluding Child Guidance)

Principal School Medical Officer ... Eric C. Downer.

Principal School Dental Officer ... John Auton.

	Number of Officers	Numbers in terms of full-time officers employed in the School Health Service
(a) Medical Officers (including the Principal School Medical Officer):—		
(i) Whole-time School Health Service	—	—
(ii) Whole-time School Health and Local Health Service	7	3.69
(iii) General practitioners working part-time in the School Health Service	2	0.27
(b) Physiotherapists, Speech Therapists, etc. (specify):—		
Speech Therapists	2	1.36
(c) (i) School Nurses	12	12
(ii) Number of the above who hold a Health Visitor's Certificate	2	—
(d) Nursing Assistants	1	1

	Officers employed on a salary basis		Officers employed on a sessional basis	
	Number of Officers	Numbers in terms of full-time officers employed in the school Dental Service	Number of Officers	Numbers in terms of full-time officers employed in the school Dental Service
(e) Dental Staff				
(i) Principal School Dental Officer ..	1	1.00		
(ii) Dental Officers ..	1	0.54	1	0.45
(iii) Orthodontists (if not already included in (e)(i) or (e)(ii) above)				
Total ..	2	1.54	1	0.45
			Number of Officers	Numbers in terms of full-time officers employed in the School Dental Service
(iv) Dental Attendants			2	2.00
(v) Other Staff (specify)				

2. NUMBER OF SCHOOL CLINICS : 11

3. TYPE OF EXAMINATION AND/OR TREATMENT provided, at the school clinics returned in Section II, either directly by the Authority or under arrangements made with the Regional Hospital Board for examination and/or treatment to be carried out at the clinic.

Examination and/or treatment (1)	Number of School Clinics (i.e. premises where such treatment is provided:—	
	Directly by the Authority (2)	Under arrangements made with Regional Hospital Boards or Boards of Governors of Teaching Hospitals (3)
A. Minor ailment and other non-specialist examination or treatment	7	
B. Dental	2	
C. Ophthalmic	—	1
D. Ear, Nose and Throat ...	—	1
E. Orthopaedic	1	
F. Paediatric	—	General Hospital
G. Speech Therapy ...	2	...
H. Others (specify):		
Ultra Violet Light ...	1	...
Child Guidance Clinic	1	...
Chiropody	At Chiropodists' Surgeries	

4. CHILD GUIDANCE CLINICS :

(1) Number of Child Guidance Clinics provided by the
Authority 1

(2) Staff of Clinics

	Number	Aggregate in terms of the equivalent number of whole-time officers
Psychiatrists	—	—
Educational Psychologists ...	1	1.00
Psychiatric Social Workers ...	—	—
Paediatricians, Play Therapists, Social Workers, etc, (<i>excluding</i> Clerks) (specify): ...		
Social Worker	1	1.00
Selected cases referred to Psychiatrist, St. Luke's Hospital, Middlesbrough.		

MIDDLESBROUGH COUNTY BOROUGH
SCHOOL HEALTH SERVICE.

Number of Children examined in 1958 and proportion who have
undergone TONSILLECTOMY :

Type of School and Age Group	Boys			Girls		
	No. Ex- amined	Tonsill- ectomy	%	No. Ex- amined	Tonsill- ectomy	%
Primary & Secondary Modern						
Entrants 5 plus	1420	138	9.72	1425	125	8.77
Intermediate 8 plus	1390	344	24.75	1334	298	22.33
Intermediate 12 plus	936	267	28.52	1053	312	29.62
Leavers 14 plus	827	216	26.11	843	283	33.57
Secondary Grammar and Technical						
Leavers 15 plus upwards	443	149	33.63	315	114	36.19
Entrants 12 plus	422	151	35.78	223	81	36.32
Special Schools						
Day School for E.S.N. ..	79	25	31.64	54	16	29.62
School for Deaf	38	19	50.00	40	16	40.00
Nursery Classes (Age under 5)	49	3	6.12	37	3	8.10
	5604	1312	23.41	5324	1248	23.42

SURVEY OF MIDDLESBROUGH PHYSICALLY HANDICAPPED AND DELICATE
PUPILS RECEIVING SPECIAL EDUCATION.

This survey is modelled on one undertaken for London County Council (1).

Code numbers are those used in "International Classification of Diseases" (2). It is hoped that it will give a standard for general comparison in years to come; also some useful pointers to approximate accommodation needed when additional special schools are built in this area and that it will, to some extent, afford material for comparison as we try to watch for any effects of radiation hazards.

					Physically Handicapped Pupils			
					Residential Schools		Home Teaching	
					Boys	Girls	Boys	Girls
081	Post-poliomyelitis	...	...	...	0	1	—	1
223	Benign Neoplasma of Brain	...	...	...	—	—	1	—
241	Asthma	...	...	...	1	—	—	—
295	Haemophilia	...	...	...	—	—	2	—
351	Cerebral Spastic Infantile Paralysis	...	...	...	—	2	—	1
416	Rheumatic Carditis	...	...	...	1	1	—	—
526	Bronchiectasis	...	...	...	1	1	—	—
593	Nephritis	...	...	...	—	1	—	1
730	Osteomyelitis	...	...	...	—	—	1	—
744	Muscular Dystrophy	...	...	...	2	—	—	—
751	Spina Bifida	...	...	...	—	—	1	—
754	Other Congenital Malformation of Heart	...	...	...	—	1	1	—
758	Absence of Hand	...	...	...	1	—	—	—
722	Rheumatoid Arthritis	...	...	...	—	1	—	—
					—	—	—	—
					6	8	6	3
					==	==	==	==

					Delicate Pupils			
					Residential Schools		Home Teaching	
					Boys	Girls	Boys	Girls
241	Asthma	...	...	...	2	1	—	—
754	Congenital Heart		...	...	—	1	—	—
526	Bronchiectasis	...	...	...	1	—	—	—
					—	—		
					3	2		
					<u> </u>	<u> </u>		

- (1) Palmer W. T. + Pirrie D. (1958). Survey of pupils in Schools for Physically Handicapped in London. Brit. Med. Jr. 29.11.58
- (2) W.H.O. (1955). International Classification of Diseases etc. Geneva.

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